County: Walworth GOLDEN YEARS HEALTH CARE CENTER 270 RIDGE ROAD

Ownership:
Highest Level License:
Operate in Conjunction with CBRF?
Title 18 (Medicare) Certified? Corporati on Skilled Yes No Average Daily Census:

25

Services Provided to Non-Residents	Age, Sex, and Primary Diagn	Length of Stay (12/31/00	%				
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis	<u>%</u>	Age Groups	% 	Less Than 1 Year 1 - 4 Years	54. 2 37. 5
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years	8. 3
Day Services Respite Care	No No	Mental Illness (Org./Psy) Mental Illness (Other)	12. 5 8. 3	65 - 74   75 - 84	4. 2 29. 2		100. 0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	50. 0	*********	******
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	4. 2	95 & 0ver	16. 7	Full-Time Equivale	
Congregate Meals Home Delivered Meals	No No	Cancer   Fractures	0. 0 0. 0		100. 0	Nursing Staff per 100 F (12/31/00)	lesi dents
Other Meals	No	Cardi ovascul ar	33. 3	65 & 0ver	100. 0	(12/31/00)	
Transportation	No	Cerebrovascul ar	16. 7			RNs	19. 8
Referral Service	No	Di abetes	8.3	Sex	%	LPNs	7. 2
Other Services Provide Day Programming for	No	Respiratory Other Medical Conditions	8. 3 8. 3	Male	29. 2	Nursing Assistants Aides & Orderlies	38. 2
Mentally Ill	No	other medical conditions	6. 3	Female	70. 8	Ardes & Orderries	30. £
Provi de Day Programmi ng for Devel opmentally Disabled			100. 0				
Developmentally Disabled	No	   * * * * * * * * * * * * * * * * * *	******	   * * * * * * * * * * * * * * * * * *	100.0	**********	*****

## Method of Reimbursement

	Medicare (Title 18)				Medicaid (Title 19)			Other P			Private Pay			Manageo	Percent		
			Per Diem			Per Di er	m		Per Die	m		Per Dien	1	Ĭ	Per Diem	Total	Of All
Level of Care	No.	%	Rate	No.	%	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	80. 00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0%
Skilled Care	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	7	29. 2	\$125.25	0	0. 0	\$0.00	7	29. 2%
Intermedi ate				0	0.0	\$0.00	0	0.0	\$0.00	10	41.7	\$119.00	0	0.0	\$0.00	10	41. 7%
Limited Care				0	0.0	\$0.00	0	0.0	\$0.00	4	16. 7	\$112.00	0	0.0	\$0.00	4	16. 7%
Personal Care				0	0.0	\$0.00	0	0.0	\$0.00	2	8. 3	\$105.75	0	0.0	\$0.00	2	8. 3%
Residential Care				0	0.0	<b>\$0. 00</b>	0	0.0	\$0.00	1	4. 2	\$92. 50	0	0.0	\$0.00	1	4. 2%
Dev. Di sabl ed				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj	. 0	0.0	<b>\$0. 00</b>	0	0.0	<b>\$0. 00</b>	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Depender	it 0	0.0	<b>\$0. 00</b>	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	<b>\$0.00</b>	0	0.0	<b>\$0. 00</b>	0	0.0%
Total	0	0.0		0	0.0		0	0.0		24	100.0		0	0.0		24	100.0%

County: Wal worth GOLDEN YEARS HEALTH CARE CENTER ************************************	*****	*******	******	Facili:	ty ID: P070	******	Page 2
Admissions, Discharges, and		Percent Distribution	of Residents'	Condi ti	i ons, Servi ces.	and Activities as of	12/31/00
Deaths During Reporting Period							
g . g		)			% Needi ng		Total
Percent Admissions from:		Activities of	%		sistance of	% Totally	Number of
Private Home/No Home Health	11. 1	Daily Living (ADL)	Independent	0ne	Or Two Staff	Dependent	Resi dents
Private Home/With Home Health	0.0	Bathi ng	0.0		91. 7	8. 3	24
Other Nursing Homes	<b>25</b> . <b>0</b>	Dressi ng	8. 3		83. 3	8. 3	24
Acute Care Hospitals	<b>55. 6</b>	Transferring	8. 3		83. 3	8. 3	24
Psych. HospMR/DD Facilities	0. 0	Toilet Use	8. 3		83. 3	8. 3	24
Rehabilitation Hospitals	0. 0	Eating	<b>62</b> . 5		29. 2	8. 3	24
Other Locations	8. 3	****************	******	*****	******	*********	******
Total Number of Admissions	36	Continence		%	Special Treat	tments	%
Percent Discharges To:		Indwelling Or External		4. 2	Recei vi ng	Respiratory Care	8. 3
Private Home/No Home Health	0. 0	Occ/Freq. Incontinent	of Bladder	58. 3	Recei vi ng '	Tracheostomy Care	0. 0
Private Home/With Home Health	0. 0	Occ/Freq. Incontinent	of Bowel	<b>58</b> . 3	Recei vi ng	Suctioning "	4. 2
Other Nursing Homes	0. 0	•				Ostomy Care	8. 3
Acute Care Hospitals	<b>54</b> . 1	Mobility			Recei vi ng '	Гube Feeding	4. 2
Psych. HospMR/DD Facilities	0. 0	Physically Restrained		0.0	Recei vi ng	Mechanically Altered Di	iets 29.2
Reĥabilitation Hospitals	0. 0				Ü	· ·	
Other Locations	8. 1	Skin Care			Other Reside	nt Characteristics	
Deaths	37. 8	With Pressure Sores		4. 2	Have Advan	ce Directives	95. 8
Total Number of Discharges		With Rashes		0. 0	Medi cati ons		
(Including Deaths)	37				Recei vi ng	Psychoactive Drugs	<b>50.</b> 0

		Ownershi p:		Bed	Si ze:		ensure:		
	Thi s	This Proprietary		Unde	Under 50		Skilled		
	Facility	cility Peer Group		Peer	Group	Peer Group		Faci l	ities
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96. 2	83. 7	1. 15	92. 9	1. 03	87. 0	1. 11	84. 5	1. 14
Current Residents from In-County	66. 7	75. 1	0.89	74. 7	0.89	69. 3	0. 96	77. 5	0.86
Admissions from In-County, Still Residing	22. 2	18. 7	1. 19	24. 5	0. 91	22. 3	0. 99	21. 5	1.03
Admissions/Average Daily Census	144. 0	152. 8	0. 94	88. 3	1.63	104. 1	1. 38	124. 3	1. 16
Discharges/Average Daily Census	148. 0	154. 5	0. 96	84. 8	1. 75	105. 4	1.40	126. 1	1. 17
Discharges To Private Residence/Average Daily Census	0. 0	59. 1	0.00	19. 3	0.00	37. 2	0.00	49. 9	0.00
Residents Receiving Skilled Care	29. 2	90. 6	0. 32	77. 6	0. 38	87. 6	0. 33	83. 3	0. 35
Residents Aged 65 and Older	100	<b>95.</b> 0	1. 05	92. 5	1.08	93. 4	1. 07	87. 7	1. 14
Title 19 (Médicaid) Funded Residents	0. 0	<b>65. 4</b>	0.00	55. 7	0.00	70. 7	0.00	69. 0	0.00
Private Pay Funded Residents	100	23. 2	4. 30	41.4	2.42	22. 1	4. 52	22. 6	4. 43
Developmentally Disabled Residents	0. 0	0.8	0.00	1. 7	0.00	0. 7	0.00	7. 6	0.00
Mentally Ill Résidents	20. 8	31.4	0. 66	47. 1	0.44	37. 4	0. 56	33. 3	0. 62
General Medical Service Residents	8. 3	23. 2	0. 36	8. 6	0. 97	21. 1	0. 39	18. 4	0. 45
Impaired ADL (Mean)	45. 8	48. 9	0. 94	49. 3	0. 93	47. 0	0. 97	49. 4	0. 93
Psychological Problems	<b>50.</b> 0	44. 1	1. 13	44. 3	1. 13	49. 6	1. 01	50. 1	1.00
Nursing Care Required (Mean)	7. 3	6. 5	1. 12	7. 2	1. 02	7. 0	1.04	7. 2	1.02